PART B - FEE(S) TRANSMITTAL

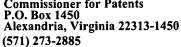
Complete and send this form, together with applicable fee(s), to: Mail

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09/890,469

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be confided where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 01/12/2006 Ivor R Elrifi Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. Mintz Levin Cohn Ferris Glovsky & Popeo One Financial Center

03/06/2006 HGEBREM2 00000010 09890469 (Signature) 700.00 DP 01 FC:2501 02 FC:8001 (Date 30.00 OP CONFIRMATION NO APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO.

David W. Buck TITLE OF INVENTION: ENRICHED CENTRAL NERVOUS SYSTEM CELL AND PROGENITOR CELL POPULATIONS AND METHOD FOR INDENTIFYING ISOLATING AND ENRICHING FOR SUCH POPULATIONS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES YES	- 01400 .\$70	\$0	-37400 \$700	04/12/2006	
EXAMINER		ART UNIT	CLASS-SUBCLASS			
HAYES, ROBERT CLINTON		1649	435-368000	_		
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			or printing on the patent front page, the names of up to 3 registered pat gents OR, alternatively, the name of a single firm (having as stered attorney or agent) and the na gistered patent attorneys or agents. I	ent attorneys s a member a mes of up to	Mintz, Levin, Cohn, Ferris, Glovsky and Popeo, P.C. Ivor R. Elrifi, Esq. Christina K. Stock, Esq.	

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE	(B) RESIDENCE: (CITY and STATE OR COUNTRY)		
StemCells California, Inc.	Palo Alto, CA		
Please check the appropriate assignee category or categories (will not be	printed on the patent):		
4a. The following fce(s) are enclosed:	4b. Payment of Fee(s):		
🛣 Issue Fee	🔁 A check in the amount of the fee(s) is enclosed.		
☐ Publication Fee (No small entity discount permitted)	Payment by credit card. Form PTO-2038 is attached.		
Advance Order - # of Copies 10	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).		
5. Change in Entity Status (from status indicated above)	Reg. No. 17810-510 NATL		
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).		
The Director of the USPTO is requested to apply the Issue Fee and Publi NOTE: The Issue Fee and Publication Fee (if required) will not be accep interest as shown by the records of the United States Patent and Tradema	cation Fee (if any) or to re-apply any previously paid issue fee to the application identified above. ted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in rk Office.		

Authorized Signature Typed or printed name

March 1, 2006

17810-510 NATT.

Registration No. 45,899

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Attorney Docket No: 17810-510 NATL (SCI-10 NATL)

Express Mail Label No.: EV461506851US Aplate of Deposit: March 1, 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Buck et al.

SERIAL NUMBER: 09/890,469 EXAMINER: HAYES, ROBERT CLINTON

FILING DATE: November 3, 2001

ART UNIT: 1649

FOR: ENRICHED CENTRAL NERVOUS SYSTEM CELL AND PROGENITOR

CELL POPULATIONS AND METHOD FOR IDENTIFYING, ISOLATING AND ENRICHING FOR SUCH POPULATIONS

MAIL STOP ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Transmitted herewith for filing in the present application are the following documents:

- 1. Issue Fee Transmittal (1 page);
- Check No. 22081 in the amount of \$730.00 (Issue Fee \$700.00, 2. Advance Copies of Patent \$30.00);
- 3. Return Postcard.

Although Applicants believe that no additional fees are due in connection with this submission, the Commissioner is authorized to credit any overpayment or charge any deficiencies to Deposit Account No. 50-0311, Reference No. 17810-510 NATL (SCI-10 NATL). A duplicate copy of this transmittal letter is enclosed.

If the enclosed papers are considered incomplete, the Mail Room is respectfully requested to contact the undersigned collect at (617) 542-6000, Boston, Massachusetts.

Respectfully submitted,

ouk, Ro. No. 45,899 Ivor R. Elrifi, Reg. No. 39,529

Attorney for Applicants

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Date: March 1, 2006